

PATENT

Attorney's Docket No.: 1218.0006

COMBINED DECLARATION AND POWER OF ATTORNEY

(ORIGINAL, DESIGN, NATIONAL STAGE OF PCT, SUPPLEMENTAL, DIVISIONAL,
CONTINUATION OR CIP)

As a below named inventor, I hereby declare that:

TYPE OF DECLARATION

This declaration is of the following type: (check one applicable item below)

☒ original

☐ design

☐ supplemental

[NOTE: If the declaration is for an International Application being filed as a divisional, continuation or continuation-in-part application do not check next item; check appropriate one of last three items.]

☐ national stage of PCT

[NOTE: If one of the following 3 items apply then complete and also attach ADDED PAGES FOR DIVISIONAL, CONTINUATION OR CIP.]

☐ divisional

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____ continuation

__X__ continuation-in-part (CIP)

INVENTORSHIP IDENTIFICATION

[WARNING: If the inventors are each not the inventors of all the claims an explanation of the facts, including the ownership of all the claims at the time the last claimed invention was made, should be submitted.]

My residence, post office address and citizenship are as stated below next to my name, I believe I am the original, first and sole inventor or an original, first and joint inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

TITLE OF INVENTION

PERSONAL LIFT AID

SPECIFICATION IDENTIFICATION

The specification of which: (complete (a), (b) or (c))

(a) __X__ is attached hereto.

(b) ____ was filed on _____ as ____ Serial No. 0 / _____

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or _____ Express Mail No., as Serial No. not yet known _____ and was amended on _____ (if applicable).

(c) _____ was described and claimed in PCT International Application No. _____ filed on _____ and as amended under PCT Article 19 on _____ (if any).

[NOTE: Amendments filed after the original papers are deposited with the PTO which contain new matter are not accorded a filing date by being referred to in the declaration. Accordingly, the amendments involved are those filed with the application papers or, in the case of a supplemental declaration, are those amendments claiming matter not encompassed in the original statement of invention or claims. See 37 CFR 1.67.]

ACKNOWLEDGEMENT OF REVIEW OF PAPERS AND DUTY OF CANDOR

I hereby state that I have reviewed and understand the contents of the above- identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined 37 C.F.R. § 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

_____ In compliance with this duty there is attached an information disclosure statement, 37 CFR 1.97.

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PRIORITY CLAIM

I hereby claim foreign priority benefits under Title 35, United States Code, 119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed.

(complete (d) or (e))

(d) X no such applications have been filed.

(e) such applications have been filed as follows.

[NOTE: Where item (c) is entered above and the International Application which designated the U.S. claimed priority check item (e), enter the details below and make the priority claim.]

EARLIEST FOREIGN APPLICATION(S), IF ANY FILED WITHIN 12 MONTHS (6 MONTHS FOR DESIGN) PRIOR TO THIS U.S. APPLICATION

COUNTRY	APPLICATION No.	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 37 USC 119

109130 TT 2 FEB 90

			__ YES __ NO
			__ YES __ NO
			__ YES __ NO
			__ YES __ NO
			__ YES __ NO

ALL FOREIGN APPLICATION(S), IF ANY FILED MORE THAN 12 MONTHS (6 MONTHS FOR DESIGN) PRIOR TO THIS U.S. APPLICATION

DOMESTIC PRIORITY CLAIM

I hereby claim domestic priority benefits under Title 37, Code of Federal Regulations § 1.78 (a)(1)-(2) of any non-provisional application(s) filed in accordance with Title 35, United States Code § 111(b) and Title 37, Code of Federal Regulations § 1.51(a)(2) and § 1.53(b)(2).

(complete (f) or (g))

(f) _____ no such provisional applications have been filed.

(g) X such non-provisional applications have been filed as follows:

[NOTE: Where item (g) is entered above, enter the details below and make the priority claim.]

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DOMESTIC (NON-PROVISIONAL) APPLICATION(S), IF ANY, FILED WITHIN 12 MONTHS PRIOR TO THIS NONPROVISIONAL U.S. APPLICATION

NON-PROVISIONAL APPLICATION SERIAL NO.	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 37 CFR § 1.78(a)(1)-(2)
09/696,372	25 October 200	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
		<input type="checkbox"/> YES <input type="checkbox"/> NO
		<input type="checkbox"/> YES <input type="checkbox"/> NO
		<input type="checkbox"/> YES <input type="checkbox"/> NO
		<input type="checkbox"/> YES <input type="checkbox"/> NO

DOMESTIC PRIORITY CLAIM

I hereby claim domestic priority benefits under Title 37, Code of Federal Regulations § 1.78 (a)(3)-(4) of any provisional application(s) filed in accordance with Title 35, United States Code § 111(b) and Title 37, Code of Federal Regulations § 1.51(a)(2) and § 1.53(b)(2).

(complete (f) or (g))

(f) _____ no such provisional applications have been filed.

(g) ☒ such provisional applications have been filed as follows:

[NOTE: Where item (g) is entered above, enter the details below and make the priority claim.]

09/21/2009 11:03:01

DOMESTIC (PROVISIONAL) APPLICATION(S), IF ANY, FILED WITHIN 12 MONTHS PRIOR TO THIS NONPROVISIONAL U.S. APPLICATION

PROVISIONAL APPLICATION SERIAL NO.	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 37 CFR § 1.78(a)(4)
60/162,857	1 November 1999	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
		<input type="checkbox"/> YES <input type="checkbox"/> NO
		<input type="checkbox"/> YES <input type="checkbox"/> NO
		<input type="checkbox"/> YES <input type="checkbox"/> NO
		<input type="checkbox"/> YES <input type="checkbox"/> NO

POWER OF ATTORNEY

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

Roger D. Emerson

Reg. No. 33,169

(check the following item, if applicable)

☐ Attached as part of this declaration and power of

attorney is the authorization of the above-named attorney(s) to accept and follow instructions from my representative(s).

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SEND CORRESPONDENCE TO

Roger D. Emerson
 One Cascade Plaza
 Fourteenth Floor
 Akron, OH 44308

DIRECT TELEPHONE CALLS TO:

Roger D. Emerson
 (330) 535-9999

DECLARATION

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

SIGNATURE(S)

Full name of sole or first inventor: Donald A. Brown

Inventor's signature

Donald A. Brown

Date 8-16-01 Country of Citizenship: USA

Residence: 3656 Durham Road, Norton, Ohio 44203

Post Office Address: 3656 Durham Road, Norton, Ohio 44203

Full name of second joint inventor, if any _____

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 11/27/01

Inventor's signature _____

Date _____ Country of Citizenship _____

Residence _____

Post Office Address _____

CHECK PROPER BOX(ES) FOR ANY OF THE FOLLOWING ADDED PAGE(S) WHICH
FORM A PART OF THIS DECLARATION

____ Signature for third and subsequent joint inventors. Number of pages added _____

____ Signature by administrator (trix), executor (trix) or legal representative for deceased or
incapacitated inventor. Number of pages added _____

____ Signature for inventor who refuses to sign or cannot be reached by person authorized under
37 CFR 1.47. Number of pages added _____

____ Added pages to combined declaration and power of attorney for divisional, continuation,
or continuation-in-part (CIP) application.

____ Number of pages added _____

____ Authorization of attorney(s) to accept and follow instructions from representative

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If no further pages form a part f this Declaration then end this Declaration with this page and check the following item

 X This declaration ends with this page

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